Request for Reinstatement

11011. Allier I can way insurance	1170372010 10.30 #133 1.014702
	226669
STATE OF SOUTH CAROLINA)
(Caption of Case)) BEFORE THE) PUBLIC SERVICE COMMISSION
Example: Application for a Class C Charter Certificate from) OF SOUTH CAROLINA
John Doe dba Doe's Limo	TRANSPORTATION COVER SHEET
) DOCKET
) NUMBER: 2010 - 369 - T
LOW COUNTRY SIGHTSGEING-LLC)
	 If this is your first time filing an application with the PSC, you will I have a Docket Number. The Commission will assign one to you. If y have filed with the Commission before, a Docket Number was assign and should be entered above.
(Please type or print) Submitted by: CHARLENG BARRETT	Telephone: (843) 681-6145
Address: 5 SAWTOOTH COURT	Fax: (843) (818932
HILTON HUAD ISLAND SO	
29936	Email: CHARLENG 123 W HARLERY CO.
	eplaces nor supplements the filing and service of pleadings or other papervice Commission of South Carolina for the purpose of docketing and mu
NATURE OF ACT	ION (Check all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Amend Passenger Limit
Application - Class C Non-Emergency NOV 0	3 2010 Request
Application - Class C Stretcher Van CLERK'S O	C Exhibit
Application - Class E Household Goods	FFICE Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certific	ate Reservation Letter
of Public Convenience and Necessity to be Rescinded	Response
Request for Cancellation of Certificate	Return to Petition
Request for Suspension	Other:

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210
dress: Post Office Drawer 11640, Columbia, SC 2021

(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100

FAX: (803) 896-5199

APPLICATION FOR CLASS C - CHARTER BUS CERTIFICATE

CLASS C - CHARTER BUS	RECEIVED Date: 11-1-10
Application is hereby made for a Cla	PSC SC ss C - Charter Bus Celefficate.
Low	onducted (corporation, partnership, or sole proprietorship, with or without trade name.)
5 50	WTO DTH COURT Street Address of Applicant
	Street Address of Applicant
HILTON	HEND ISLAND SC 29926 ag Address of Applicant if different from street address
Mailir	g Address of Applicant if different from street address
(843) 681-614	5 (CELL) (843) 816-1681 (843) 681-8932 FAX IE 123 W 1-tmcorray, COM Email Address
Phone	FAX
CHARLEN	IE 123 W HARDRAY, COM
	Email Address
2. If incorporated, a copy of Articles Secretary of State "Foreign Corpor	of Incorporation must be attached. (If incorporated outside of SC, attach SC ration" Certificate.)
3. Select Entity Type: (Check one)	
Individual Owner/Sole Proprie	address of all person having an interest in the business.
	addresses of two principal officers.
FLIC CHARLENE BAK	PRETT, MANAGER & SOLE PLAFER MEMBER
	•

DESCRIPTION OF EQUIPMENT

	MAKE	YEAR & MODEL	VIN#	WEIGHT EMPTY	SEATING CAPACITY
	70 .	BE OLOUKUS	2-25 PAX CHAMPIC 1-14 PAX VAN	ON BUSES	
			1-14 PAX VAN		

			791407 1444 71144 7144		
-					
~					

INSURANCE QUOTE

This form MUST BE COMPLETED AND S	IGNED by an AUTHORIZED INSURANCE COMPANY REPRESENTATIVE.
The following insurance quote is for:	
Low Courm	Name of Motor Carrier TH Court Hilran Hano SC 39926 Address of Motor Carrier
-	Name of Motor Carrier
5 SAWTOO	TH COURT, 14650N / 1240 SC 38926
	Address of Motor Carrier
Amount of Premium:	Limits Quoted: (See Below)
Liability Insurance \$ 7,893.	Limits 5, oro, oro
The above quoted premium is for a term	of 12 months.
Minimum Limits - Intrastate Only: 16 or More Passenge	ers \$ 25,000/300,000/25,000
	ZURICH
	Name of Insurance Company
29 HAVILAND SI	REST NORWALK CT. 06854— Home Office Address of Company
	es and Regulations relating to insurance requirements and the above quote cribed. The insurance company making this quote is authorized by the to do business in South Carolina.
11/2/2010	Jallasi Co-
Duty	Authorized Insurance Company Representative's Signature

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested.

Exhibit FWA

_	Name	
	NOT YET APPLIED FUR	
	U.S.D.O.T No.	ICC No.
1.	1. Does Applicant have a Safety Rating from the U.S.D.O.T.?	
	○ Yes	ng (Submit when received.)
	If Yes, indicate rating below and provide copy. Satisfactory Conditional	Unsatisfactory
2.	 2. Have any of Applicant's drivers or vehicles been places "out of the past twelve (12) months? Yes No 	service" by Transport Police safety officers in
3.	3. Are there currently any outstanding judgments against the Appl O Yes No If Yes, indicate nature of judgement(s) against applicant.	icant?
	 4. Is Applicant familiar with all insurance regulations and safety reoperations in South South Carolina, and does Applicant agree to Yes No 	
5.	 5. Is Applicant aware of the Commission's insurance requirements therewith? Yes No 	and the insurance premium costs associated

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA **POST OFFICE DRAWER 11649** COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol 23A, S.C. Code Ann. 1976) and amendments thereto, and hereby promises compliance

Wilder Carriers (Vol.25A, 5.C. Code Ami., 1970) and amendments district, and noted promises comprised
therewith. Two Country Syttseery, we
STATE OF SOUTH CAROLINA
COUNTY OF Besufre Charlese Barrett Applicant's Signature
$M_{\rm I}$
harlue Barret Revient
Name of Applicant's Representative Title
Applicant
the Applicant for the Charter Bus Certificate as set forth in the foregoing, swear or affirm that all statements
contained in the above application are true and correct.

This 2 md day of Moreamles 10

Commission Expires 10-39-201

OBTAINFIED TO BE A TRUE AND CORRECT COPY AS TAKEN FROM AND COMPASED WITH THE ORIGINAL ON FILE IN THIS OFFICE

STATE OF SOUTH CAROLINA SECRETARY OF STATE

MAR 2 9 2010

ARTICLES OF ORGANIZATION

Limited Liability Company - Domestic Filing Fee - \$110.00

77 *	7 1 1	1	1	
* * *	/ I Li	, ,	2	
2.14	الاستة ماين	·- [<i>•</i>	
			<u> </u>	
- Mary Company of the Company			I. A.D. L. X.IXI	-BLACK INK
and the second second		IXITI CE		DLACKINK

	The name of the limited liability compa	ny (Company ending must be i	ncluded in name*)	
1	Low Country Sightseeing, LLC			
(*NOTE: The name of the limited liab "limited liability company" or "limite or "LC". "Limited" may be abbrevia "Co."	d company" or the abbreviation	on "L.L.C.", "LLC", L.	
-	The address of the initial designated office of the limited liability company in South Carolina is			
ţ	5 Sawtooth Court			
-		Street Address		
ł	Hilton Head Island		29926	
(City		Zip Code	
,	The initial agent for service of process is	•		
	Charlene D. Barrett			
_	Vame	Signature of Agent		
а	and the street address in South Carolina	for this initial agent for service of	of process is	
Ę	5 Sawtooth Court			
_		Street Address	****	
ŀ	Hilton Head Island		29926	
7	City		Zip Code	
I t	List the name and address of each organ han one.	izer. Only <u>one</u> organizer is requ	ired, but you may have n	
I t	han one. (a) David J. Tigges	izer. Only <u>one</u> organizer is requ	ired, but you may have n	
I t	han one.	izer. Only <u>one</u> organizer is requ	ired, but you may have n	
I t	han one. a) David J. Tigges Name	izer. Only <u>one</u> organizer is requ	ired, but you may have n	
I t	han one. a) David J. Tigges Name 23B Shelter Cove Lane Suite 400	izer. Only <u>one</u> organizer is requ	ired, but you may have n	
I t	han one. a) David J. Tigges Name 23B Shelter Cove Lane Suite 400 Street Address			
I t	han one. a) David J. Tigges Name 23B Shelter Cove Lane Suite 400 Street Address Hilton Head Island	SC	29928	
I t	han one. a) David J. Tigges Name 23B Shelter Cove Lane Suite 400 Street Address Hilton Head Island City	SC	29928	
I t	han one. a) David J. Tigges Name 23B Shelter Cove Lane Suite 400 Street Address Hilton Head Island City b)	SC	29928	
I ti	han one. a) David J. Tigges Name 23B Shelter Cove Lane Suite 400 Street Address Hilton Head Island City b) Name	SC State	29928 Zip Code	

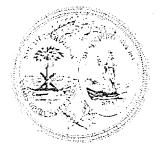
Mark Hammond

South Carolina Secretary of State

Name of Limited Liability Company ______ Low Country Sightseeing, LLC

[] Check this box only if managemanagers. If this company is to be initial manager.	gement of the limited liability commanaged by managers, include	
(a) Charlene D. Barrett		
Name 5 Sawtooth Court		
Street Address	20	20020
Hilton Head Island	SC State	29926 Zip Code
·		•
(b) Name		MARKET CALLED TO THE CALLED TH
Street Address		
Suod Addes		
City	State	Zip Code
and obligations under §33-44-303(c		so liable, specify which members
	c). If one or more members are so liabilities such members are liab not have to be completed. pecified, these articles will be effective and the second statement of the seco	so liable, specify which members ole in their capacity as members. fective when endorsed for filing
and obligations under §33-44-303(a and for which debts, obligations or This provision is optional and does Unless a delayed effective date is specified to the second sec	c). If one or more members are so liabilities such members are liabilities such members are liabilities such members are liabilities such members are liabilities and have to be completed. pecified, these articles will be effany delayed effective date and the liabilities are permitted to be set forth in the led on a separate attachment. Ple	so liable, specify which members le in their capacity as members. fective when endorsed for filing me. s determine to include, including the limited liability company
and obligations under §33-44-303(c) and for which debts, obligations or This provision is optional and does Unless a delayed effective date is sp by the Secretary of State. Specify a Any other provisions not inconsiste any provisions that are required or a operating agreement may be included.	c). If one or more members are so liabilities such members are liabilities such members are liabilities such members are liabilities and have to be completed. pecified, these articles will be effany delayed effective date and the ent with law which the organizers are permitted to be set forth in the ed on a separate attachment. Pleachment.	so liable, specify which members le in their capacity as members. fective when endorsed for filing me. s determine to include, including the limited liability company ease make reference to this
and obligations under §33-44-303(c) and for which debts, obligations or This provision is optional and does Unless a delayed effective date is sp by the Secretary of State. Specify a Any other provisions not inconsiste any provisions that are required or a operating agreement may be include section if you include a separate attach organizer listed under number	c). If one or more members are so liabilities such members are liabilities such members are liabilities such members are liabilities such members are liabilities and have to be completed. pecified, these articles will be effany delayed effective date and times are permitted to be set forth in the led on a separate attachment. Pleachment. 14 must sign. March 25, 2	so liable, specify which members le in their capacity as members. fective when endorsed for filing me. s determine to include, including the limited liability company ease make reference to this
and obligations under §33-44-303(a and for which debts, obligations or This provision is optional and does Unless a delayed effective date is sp by the Secretary of State. Specify a Any other provisions not inconsiste any provisions that are required or a operating agreement may be include section if you include a separate attachment.	c). If one or more members are so liabilities such members are liabilities such members are liabilities such members are liabilities and have to be completed. pecified, these articles will be effany delayed effective date and the ent with law which the organizers are permitted to be set forth in the ed on a separate attachment. Pleachment.	so liable, specify which members le in their capacity as members. fective when endorsed for filing me. s determine to include, including the limited liability company ease make reference to this

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

LOW COUNTRY SIGHTSEEING, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on March 26th, 2010, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 1st day of April, 2010.

Mark Hammond, Secretary of State

Action Taken by Consent of the Organizer of Low Country Sightseeing, LLC

Effective as of the 29th day of March, 2010

The following resolutions are adopted by the consent of the organizer of Low Country Sightseeing, LLC, a South Carolina limited liability company ("Company").

1. <u>Resolution Admitting Members</u>. The following resolution with respect to the admittance of the sole Member of the Company is hereby adopted:

RESOLVED, effective as of the 29th day of March, 2010, the following individual is hereby admitted as the sole Member of the Company.

Charlene D. Barrett

2. <u>Resolution Affirming Articles of Organization</u>. Articles of Organization for the Company were filed with the South Carolina Secretary of State. This resolution reaffirms all of the terms and provisions contained in said Articles of Organization.

RESOLVED, the Articles of Organization, as filed with the South Carolina Secretary of State, are hereby affirmed as being the Articles of the Company.

The above resolutions were taken by the organizer of the Company and the organizer has consented to these actions by signing his name below. These resolutions shall be effective on the date first set forth above.

David J. Tigges, Organize

Operating Agreement of Low Country Sightseeing, LLC

This Operating Agreement ("Agreement"), effective as of the _29th day of March, 2010, for good and valuable consideration is adopted by the Member (as defined below).

- 1. <u>Definitions</u>. As used in this Operating Agreement, the following terms have the following meanings.
 - 1.1 Act. "Act" means the South Carolina Limited Liability Company Act of 1996 and any successor statute as amended from time to time.
 - 1.2 Agreement. "Agreement" means this Operating Agreement as amended and modified from time to time.
 - 1.3 Articles. "Articles" means the Articles of Organization filed with the Secretary of State of South Carolina.
 - 1.4 <u>Code</u>. "Code" means the Internal Revenue Code of 1986 and any successor statute, as amended from time to time.
 - 1.5 <u>Company</u>. "Company" means Low Country Sightseeing, LLC, a South Carolina limited liability company.
 - 1.6 Manager. "Manager" means Charlene D. Barrett.
 - 1.7 Member. "Member" means Charlene D. Barrett.
 - 1.8 <u>Person</u>. "Person" means an individual, partnership, limited partnership, limited liability company, foreign limited liability company, trust, estate, corporation, custodian, trustee, executor, administrator, nominee or entity in a representative capacity.

2. Organization.

- 2.1 <u>Formation</u>. The Company has been organized as a South Carolina Limited Liability Company by the filing of Articles pursuant to the Act.
- 2.2 <u>Admittance of Member</u>. Evidenced by executing this Agreement, Charlene D. Barrett hereby agrees and consents to be admitted to the Company as its sole Member.

3. Membership.

3.1 <u>Additional Members</u>. Additional Persons may be admitted to the Company as a Member, on such terms and conditions as the Member and Manager may determine at the time of admission. Any such admission also must comply with the requirements described elsewhere in this Agreement and is effective only after the new Member has executed and delivered to the Company this Agreement, as amended.

- 3.2 <u>Liabilities to Third Parties</u>. Except as otherwise expressly agreed in writing, no Member shall be liable for the debts, obligations or liabilities of the Company, including under a judgment decree or order of a court.
- 3.3 <u>Withdraw or Disassociation</u>. No Member may withdraw or dissociated from the Company.

4. <u>Capital</u>.

- 4.1 <u>Capital Contributions</u>. No interest shall accrue on any capital contribution and the Member shall have the right to withdraw the capital with the consent of the Manager. A Member shall only be required to contribute capital to the Company upon such Member's consent.
- 4.2 <u>Loans by a Member</u>. The Member may consent to loan funds to the Company. A loan from the Member to the Company shall be upon the terms and conditions agreed to by the Company and the Member.

5. Management by Manager.

- 5.1 <u>Management</u>. The powers of the Company shall be exercised by or under the authority of, and the business and affairs of the Company shall be managed under the direction of the Manager. Without limiting the foregoing, the Manager shall make all decisions and take all actions for the Company not otherwise provided for in this Agreement, including, without limitation, the following:
 - (a) enter into contracts, agreements, and other undertakings binding the Company that may be necessary, appropriate, or advisable in furtherance of the purposes of the Company and making all decisions and waivers thereunder;
 - (b) execute and deliver any deed, lease, mortgage, mortgage note, bill of sale, easement, license, contract or other instrument purporting to convey, sell, exchange or encumber all or any part of the Company's property in accordance with the business plan;
 - (c) deposit or invest Company funds in such interest bearing or non interest bearing investments or bank accounts as it deems advisable;
 - (d) retain or employ and coordinate the services of employees, independent contractors, supervisors, accountants, attorneys and other persons necessary or appropriate to carry out the business and purposes of the Company;
 - (e) engage in any kind of activity and to perform and carry out any and all contracts of any kind necessary to operate the business and purposes of the Company; and
 - (f) pay all debts and other obligations of the Company, to the extent that funds of the Company are available therefor.